## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 200310593-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

IMAGING MEDIA AND MATERIALS USI	D 1	THEREIN
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•				to my mamo,		
I believe I am the origination inventor (if plural patent is sought on the IMAGING MEDIA AND I	names inventi	are listed below) of th on entitled:	nly one name is listed e subject matter wh	d below) or an original, first and ich is claimed and for which a		
the specification of whi	ch is at	tached hereto unless th	ne following box is c	hecked:		
			-			
	( ) was filed on as US Application No. or PCT International Application  Number and was amended on (if applicable).					
			· ·			
I hereby state that I ha including the claims, as disclose all information	amen	ded by any amendmen	t(s) referred to above	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.		
Foreign Application(s) and/or	Claim of	Foreign Priority				
I hereby claim foreign priority inventor(s) certificate listed be filing date before that of the	elow and	l have also identified below a	iny foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate having		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
				YES: NO:		
			<del></del>	YES: NO:		
Provisional Application			· · · · · · · · · · · · · · · · · · ·			
I hereby claim the benefit un below:	der Title	35, United States Code Sec	tion 119(e) of any United	d States provisional application(s) listed		
Γ		APPLICATION NUMBER	FILING DATE			
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U. S. Priority Claim						
insofar as the subject matter manner provided by the first	of each paragrap 37, Coo	of the claims of this applicat th of Title 35, United States de of Federal Regulations, Sec	tion is not disclosed in th Code Section 112, I ack ction 1.56(a) which occur	States application(s) listed below and, the prior United States application in the nowledge the duty to disclose material tred between the filing date of the prior		
APPLICATION NUMBER		FILING DATE	STATUS (	patented/pending/abandoned)		
***						
POWER OF ATTORNEY						
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and Tra	eby appo ademark	int the following attorney(s) Office connected therewith:	and/or agent(s) to pros	ecute this application and transact all		
Customer I	ب م ما مسالا	022879	Place Customer	٦		
Customeri	AGIIIDBI	022079	Number Bar Code Label here			
Send Correspondence to:				-J		
HEWLETT-PACKARD CON	//PANY		Direct Telepho	ne Calls To:		
Intellectual Property Admi	nistration	1	W. Bradley Ha	ymond		
P.O. Box 272400 Fort Collins, Colorado 80	527-240	0	541 715 0159			
I hereby declare that al made on information a with the knowledge tl imprisonment, or both,	l stater nd bel hat wil under	ments made herein of nief are believed to be fillful false statements Section 1001 of Title	true; and further tha and the like so ma 18 of the United Sta	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willful		
false statements may je	opardiz	e the validity of the app	plication or any pater	nt issued thereon.		
ull Name of Inventor: Vladek P Kasperchik Citizenship: US						

Rau 10/03 (DacPur)

Residence:

4308 NW Jon Pl. Corvallis, OR 97330 US

Same as residence

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 200310593-1

Full Name of joint inventor:	Makarand P. Gore		Citizenship: US			
Residence:	1210 NE Conroy Pl. Corvallis, OR 97330 US					
Post Office Address:	Same as residence	_				
Inventor's Signature	f Gose	Date	October 28/2003			
Full Name of joint inventor:	Marshall_Field_		Citizenship: US			
Residence:	3522 NW Robin Corvallis, OR 973	30 US				
Post Office Address:	Same as residence					
Moustrall.	Field		/23/2003			
Inventor's Signature		Date				
Full Name of joint inventor:	Jayprakash Bhatt		Citizenship: US			
Residence:	1016 NE Lorvik Place Corvallis, O	R 97330	United States			
Post Office Address:	Same as Residence					
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Inventor's Signature	J	Date				
Full Name of joint inventor:			Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
•		Date				
Fuli Name of joint inventor:			Citizenship:			
Residence:		_	Citizensinp.			
Post Office Address:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of joint inventor:			Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of joint inventor:			Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature	<del></del>	Date				